

12-02-05  
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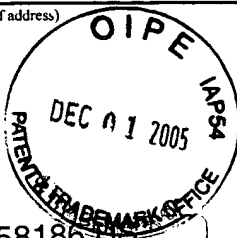
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7590 09/27/2005

SCOTT A. MCBAIN, ESQ.  
DELPHI TECHNOLOGIES INC.  
LEGAL STAFF, MAIL CODE: 480-414-420  
P.O. BOX 5052  
TROY, MI 48007-5052

EV 312958186-05



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Susan Grisham	(Depositor's name)
Susan Grisham	(Signature)
12-1-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/081,122	02/22/2002	Bryan P. Riddiford	DP-305565 (7500/87)	8542
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TITLE OF INVENTION: FAST MODE RELEASE IN A FORCE GENERATING APPARATUS

12/05/2005 BABRAHA2 00000094 500831 10081122

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S)	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/27/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
WILLIAMS, THOMAS J	3683	303-003000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Michael D. Smith

2.

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

DELPHI TECHNOLOGIES, INC.

TROY, MICHIGAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 2

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- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 500831 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Susan Grisham

Date

12-1-05

Typed or printed name

Susan Grisham

Registration No.

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